Dr. D. Raghavendra Rao.—I may be permitted to read a letter from the Secretary to the Board: "I am directed by the Secretary to the Medical Board to inform the House that the Union was on receipt of a grant of Rs. 600 from 1925 onwards, and then afterwards on 19th September 1930 the Government of Travancore gave a grant of Rs. 15,000 inclusive of the original grant. At the close of 1106 and in 1107 this Rs. 30,000 has been given."

Dr. A. R. Menon.—They are giving Rs. 15,000 a year.

Dr. D. Raghavendra Rao.—It is only for these two years. Unlike our State, Travancore Durbar is contemplating to start a Sanatorium.

Mr. Joseph Pettah.—Is this Rs. 5,000 a lump sum grant or is it to be a recurring grant?

Dr. D. Raghavendra Rao.—It is at present a lump sum grant.

Dr. A. G. Menon.—Is it a grant or a donation?

Dr. D. Raghavendra Rao.—It is a donation.

Dr. A. R. Menon.—Do you expect to give an annual grant?

Dr. D. Raghavendra Rao.—At present it is not contemplated.

Motion No. 1.

Mr. P. Kumaran Ezhuthassan.—*To reduce the allotment of Rs. 5,000 under Medical by one rupee'.*

Mr. P. Kumaran Ezhuthassan.—Sir, I sent the cut motion to see that definite conditions are attached to the grant. But things have been explained to me in the Finance Committee Meeting and I am convinced that it is not possible to get any sort of condition from the Sanatorium authorities and we have to depend upon their sense of fair play and we hope that since the Travancore Government and the Madras Government both have given large amounts without conditions we will also be not going wrong if we give the grant without conditions and especially as it is found not possible to attack any conditions to the grant. So, I don't move this cut.

Hence the motion was considered withdrawn.

The grant was then put and carried.

6. Vaccination—Rs. 2,000.

Dr. D. Raghavendra Rao.—Sir, I rise to move this House for a grant of Rs. 2,000 under vaccination. It is intended to meet the extra expenditure for the purchase of lymph and also the appointment of 8 additional vaccinators during the rest of the year. Small-pox has been raging in an epidemic form in the town of Trichur for over a year and it has not been possible

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to control its spread, mostly due to the apathy on the part of the public in not getting themselves vaccinated in time. Though the rule exists in the Municipal Regulation regarding vaccination having been made compulsory, it is a painful fact to observe that even amongst the educated, highly placed citizens of Trichur, vaccination is dreaded with the result that the present panicky condition has come to stay. And people who are living within the town of Trichur—once they get small-pox migrate to the nearest villages and all round the town of Trichur the villages are now affected—it is not possible just now to control the epidemic unless additional vaccinators are appointed and vaccination is carried on an intensive scale. So, I had to address the Government for the appointment of 8 additional vaccinators and arrangements have been made to get extra lymph to the extent of 1000 cases per week, so that intensive vaccination may be carried on during the next few weeks in order to put down the epidemic that is prevalent now.

Dr. A. G. Menon.—Is it only for Trichur?

Dr. D. Raghavendra Rao.—We have at present on our permanent establishment 16 vaccinators, 14 of whom are in the State and two in Cranganur, inclusive of one female vaccinator. We all know that vaccination is the only measure against small-pox and it has not been made compulsory in the rural areas of the State with the result that the vaccinator is in helpless condition when he goes round and he has to get the help of the Revenue authorities in the place as well as some influential people. It is only when small-pox comes on as an epidemic that people clamour for the vaccinator's help. And just at that time we find it very difficult to get extra lymph from Madras and Bangalore at very short notice and we find it impossible to get on with these few vaccinators. The State is divided into 4 circles each circle having only 4 vaccinators. We find it very difficult to cater to all people. These extra 8 vaccinators are highly necessary and I request the House to allow this grant.

Motion No. 1

The mover being absent the following motion was considered withdrawn.

Mr. A. Sankara Poduval.—*To reduce the allotment of Rs. 2,000 under vaccination by Re. 1.*

Motion No. 2.

Mr. T. A. Ramachandra Ayyar.—*To reduce the allotment of Rs. 2,000, under vaccination by Re. 1.*

Mr. T. A. Ramachandra Ayyar.—Sir, I have tabled this cut motion to call the attention of the Government that no care is taken about villages as regards

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vaccination. The Chief Medical and Sanitary Officer now said that small-pox is doing havoc in the town of Trichur. I say it is doing more havoc in all the villages of the Mukundapuram Taluk. There is not a single Desam there not affected by the disease. Probably the Sanitary Officer does not know that there is small-pox in the villages or that he thinks these villagers are 'countries', and countries deserve no care. But you must remember that though they are countries they are also tax-payers and deserve equal attention. I had to take all my people to Trichur to get themselves vaccinated. So, I want these villagers also should be taken care of and vaccination must be done in villages also and some propaganda work also must be done in these village parts. The Chief Medical Officer said that even town people are dreaded when these vaccinators go there ; more so villagers. So some propaganda work must also be done in the villages.

Dr. A. R. Menon.—Sir, the Chief Medical Officer tries to put more blame upon us than we deserved. It is our misfortune that this disease seems to have a great affection for us and does not seem to desert us for the last 11 or 12 months. The statement is really wrong when he says that it has been spreading in an epidemic form for the last 12 months. Nothing of the kind. I have got the figures. It assumed a serious proportion very lately, about two months ago, and very seriously indeed a month ago. If you go through the list, you will find a large number of cases come from outside the limits of the Trichur urban area. I hold that the rural people are responsible to a very great extent in infecting the town of Trichur and not the town of Trichur in infecting the rural areas. There is the list. You will find the people coming from various parts. But the Municipality does not make any difference so far as this matter is concerned between people within the Municipal area and outside the Municipal area. We treat them alike. Though I have my own doubts whether we are justified legally in doing so, we have not made any difference and I may say for the information of this House that I have given instructions, if time permits and if the hands are available, that they may go outside the Municipal limits to help the people in the rural area. Some are going outside the limits in the afternoon. In Mulakunnathukavu there is no vaccinator at all. People came there and said they wanted a vaccinator to vaccinate nearly 50 people, and a vaccinator was deputed. Similarly in the matter of any expenses, we do not make any difference. We do not claim any compensation from the Government. We equally distribute. At the late outbreak of cholera we got preventive medicine and we distributed not

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only within the town but also areas outside the town. The truth of the matter is as the Chief Medical and Sanitary Officer observed, there is aversion on the part of the people to get themselves vaccinated. Some honestly believe that vaccination does not protect them, some simply for the sake of wilfulness oppose it, some for some other sinister and ulterior motive also opposeit. You will understand sinister and ulterior motive can only be due to members of our collateral profession. These are the three classes. It is very easy to say that you don't prosecute people. In Municipal law if you begin to prosecute, I don't think there will be a single one who will escape prosecution. Every one is violating one law or other. He will be a confounded fool who undertakes prosecution for every little violation. What we do is, when it becomes intolerable, when we think that strong measures must be taken, we select from the list, first Government Officials for prosecution. That is what I did. First Government Officials, then professional class and the rich class and lastly only people of the rickshawala type is prosecuted and there were 120 cases pending before the bench Magistrates' Court (prosecution cases). Some of the Government Officials came to me and the case was withdrawn after paying a compounding fee. But as soon as the outbreak in an epedemic form took place they were very anxious to get themselves vaccinated as the Chief Medical and Sanitary Officer said. Everybody wanted to be vaccinated so much so in the town of Trichur we had vaccinated over 200 people in one day which is the number for one month under normal conditions. These vaccinators are working overtime from morn to night. And even other officials are deputed along with these vaccinators. All this people, no matter whether they belong to the town or outside, who come into the town are looked after by us. Our infectious shed is large. There are 30 patients now under treatment. 6 attendants are attending upon them. And I have sent a wire to the Chief Medical and Sanitary Officer to send me a nurse on any salary he likes. All these measures are taken, beyond that nothing can be done. The truth of the matter is that there is a cycle and occasionally there is an outbreak and nobody can give any reason to avoid it. The only thing is to carry on vaccination and re-vaccination. Everything that has to be done is being done within the Municipal area and I hold that if similar strong measures were taken outside the town then only there will be a decided improvement within the town. Therefore, this House must not grudge in paying money in a matter like this and the House must call upon the Government to spend money with both hands to get rid of this accursed disease.

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മിസ്റ്റർ ടി. കെ. നായർ.—രണ്ടു കൊല്ലം മുമ്പ് ചേലക്കര, പഴയന്നൂർ മുതലായ സ്ഥലങ്ങളിൽ മസൂരി ദീനം വളരെ അധികമായിട്ടുണ്ടെന്നും, അതിലേയ്ക്കു വേണ്ടുന്നഏർപ്പാടുകൾ ഗവൺമെൻറ് ചെയ്യണമെന്നും ഈസഭയിൽ ഞാൻ അപേക്ഷിച്ച അവസരത്തിൽ അവിടെ നൂറിൽ പരം ആളുകൾ ഈ രോഗം നിമിത്തം മരിച്ചിട്ടും ൪ പേർ മാത്രം മരിച്ചിട്ടുള്ളതായി ഗസറിൽ സ്റ്റേറ്റുമെൻറു കണ്ടു. ഉൾനാടുകളിലുള്ള കാര്യങ്ങൾ ഗവൺമെൻറിനെ ധരിപ്പിയ്ക്കുന്നതു് ഇപ്രകാരമാണെന്നു കാണിയ്ക്കുന്നതിനാണ് ഞാൻ ഇതിവിടെ പറഞ്ഞതു്. വാക്സിനേറു ചെയ്യാത്തതു കൊണ്ടാണ് ഇത്രയധികം ആളുകൾ മരിയ്ക്കുന്നതു് എന്നും, വാക്സിനേറു ചെയ്യുവാൻ ആളുകൾ സമ്മതിക്കുന്നില്ലെന്നും മാറുമാണ് കാരണം പറഞ്ഞതു്. വാക്സിനേറു ചെയ്താൽ ഈ രോഗത്തിനു് ശമനമുണ്ടാകുമെന്നാണ് ഗവൺമെൻറിന്റെ അഭിപ്രായമെങ്കിൽ ജനങ്ങളെ നിർബ്ബന്ധിച്ചും വാക്സിനേറു ചെയ്യേണ്ടതായ ചുമതല ഗവൺമെൻറിനുണ്ട്. ഒരു കുട്ടിയ്ക്കു സുഖക്കേടിനു ഡാക്ടർ ഒരു മരുന്നു കൊടുക്കുമ്പോൾ ആയതു തനിക്കു വേണ്ടെന്നു പറഞ്ഞ് കഴിയുന്നതിനെ കണ്ട് ആരെങ്കിലും മരുന്നു കൊടുക്കാതിരിക്കാറുണ്ടോ? ആ സുഖക്കേടിനു ആ മരുന്നു തന്നെയാണ് കൊടുക്കേണ്ടതെന്നു വച്ചാൽ തീച്ചയായും നിർബ്ബന്ധിച്ചെങ്കിലും അതു തന്നെ കൊടുക്കണം. അതു പോലെ തന്നെ വാക്സിനേഷൻ ചെയ്താൽ സുഖക്കേടു വരികയില്ലെന്നു നിശ്ചയമുണ്ടെങ്കിൽ അതു തന്നെ ചെയ്യണം. അല്ലാതെ ജനങ്ങൾ അതു സമ്മതിയ്ക്കുന്നില്ലെന്നും മാറും പറഞ്ഞ് യാതൊന്നും ചെയ്യാതിരിക്കുന്നതു് ശരിയല്ല. വാക്സിനേറു ചെയ്താൽഇത്ര ദീനം ഒഴിഞ്ഞുപോകുമെന്നു് ഗവൺമെൻറിനു പൂർണ്ണ ബോദ്ധ്യമുണ്ടെന്നു വരികിൽ എന്തുകൊണ്ടു് അതു നിർബ്ബന്ധമായിട്ടു് ചെയ്യുന്നില്ലെന്നാണ് ഞാൻ ചോദിയ്ക്കുന്നതു്. അതോ വാക്സിനേഷനിൽ നല്ല വിശ്വാസം ഇല്ലാത്തതു കൊണ്ടോണോ? അതു വേണ്ടതാണോ അല്ലയോ, പണമുണ്ടോ, ഇല്ലയോ എന്നു് ഗവൺമെണ്ടിനിതുവരേയും നല്ല ബോദ്ധ്യം വന്നിട്ടില്ലെന്നാണ് തോന്നുന്നത്. അതുകൊണ്ടായിരിയ്ക്കാം വാക്സിനേഷൻ നിർബ്ബന്ധമാക്കാത്തതു്. ഈ വിഷയത്തിനു വേണ്ടി വളരെ പണച്ചിലവും ചെയ്തുകാണുന്നുണ്ടു്. അതുകൊണ്ടു തീരെ ഫലവും കാണുന്നില്ല. ഇതിലേയ്ക്കു വേണ്ടി ചിലവിടുന്ന പണം പ്രയോജനപ്പെടണമെന്നു ഗവൺമെൻറിനു വിചാരമുണ്ടെങ്കിൽ ഈ കാര്യത്തിൽ നല്ലപോലെ ആലോചിച്ചു് ഒരു മാർഗ്ഗം കണ്ടുപിടിയ്ക്കണം. കുത്തിവയ്ക്കുന്നതുകൊണ്ടു ഫലമുണ്ടെന്നാണ് ഗവൺമെൻറിന്റെ ബോദ്ധ്യമെങ്കിൽ ഇതിനെ നിർബ്ബന്ധമാക്കണം. അതിലേക്കു കഴിയുന്ന വേഗത്തിൽ ഒരു നിയമം പാസാക്കണം. കൊച്ചി രാജ്യത്തു് വാക്സിനേഷൻ ചെയ്വാൻ ആരെങ്കിലും തടസ്സപ്പെടുത്തുന്നുണ്ടെങ്കിൽ അവർ കുറക്കാരാണെന്നു വയ്ക്കുകയും, ഓരോ സ്ഥലങ്ങളിലും വാക്സിനേററർമാരെ അയച്ചു വാക്സിനേറു ചെയ്യുകയും ചെയ്യുനോക്കട്ടെ; അങ്ങിനെയായാൽ തീച്ചയായും കൊച്ചി രാജ്യത്തിലെങ്ങും വാക്സിനേറു ചെയ്യാത്തവരായി ആരും ഉണ്ടാകുന്നതല്ല. തൃശ്ശിവപേരൂരിൽ ൫,൦൦൦ രൂപാ ചിലവാക്കി, അവിടെ കുറെ ചിലവാക്കി, ഇവിടെ കുറെ ചിലവാക്കിയെന്നൊക്കെ പറഞ്ഞു പണം ചിലവാക്കിയാൽ സുഖക്കേടു നില്ക്കുമോ? അതു മിയ്ക്കുലും നില്ക്കുയില്ല. ഇങ്ങനെയൊരു നിയമം പാസ്സാക്കിയ ശേഷമാണ് ഈ പണം ചിലവാക്കുന്നതെങ്കിൽ പ്രയോജനമുണ്ടു്. അല്ലാതെ പണം ചിലവാക്കുന്നതിൽ ഒരർത്ഥവുമില്ല. ഇതു പറയുമ്പോൾ കൊച്ചീരാജ്യത്തുള്ള സകല ജനങ്ങളേയും ചെന്നു കണ്ടു അവരെ മുഴുവൻ വാക്സിനേറു ചെയ്യുവാൻ സാധിയ്ക്കുമോ? എന്നു ചോദിയ്ക്കുമായിരിയ്ക്കാം. അങ്ങിനെ ചോദിയ്ക്കുമാണ് ഭാവമെങ്കിൽ ജനങ്ങളെല്ലാം ഈ രോഗം കൊണ്ടു മരിച്ചുകൊള്ളട്ടെയെന്നാണോ ഗവൺമെൻറു് വിചാരിയ്ക്കുന്നതു്? പറഞ്ഞാൽ കേൾക്കാത്തവരെ നിയമപ്രകാരം നിർബ്ബന്ധിയ്ക്കണം. വാക്സിനേറു ചെയ്യുന്നതു കൊ

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ണ്ട ഇൗ രോഗത്തെ തീരെ നിർത്തുവാൻ സാധിയ്ക്കയില്ലെന്നാണ് ചീഫ് മെഡിയ്ക്കൽ ഹീസർ അവർകൾ അഭിപ്രായപ്പെട്ടതെങ്കിൽ അതിനു വേണ്ടി ആവശ്യമില്ലാതെ ഒരു പൈപോലും ഗവർമ്മെണ്ടിൽ നിന്നും ചിലവാക്കരുതെന്നാണ് ഞാൻ ഗവർമ്മെണ്ടിനോടപേക്ഷിയ്ക്കുന്നതു്.

Joseph Pettah.—Sir, in speaking on this motion, I like to impress upon the Government the necessity of proper propaganda work in this matter. The Chief Medical Officer and also the Honourable Member for Cheruviruthi have been pleased to refer to the disinclination of the people to get themselves vaccinated. In fact, there is a large amount of disinclination on the part of the people, and that I think in most cases is due to an honest difference of opinion. This difference of opinion may be out of ignorance. Therefore it is the first duty of the Government to carry on propoganda in this particular matter so as to enlighten the people. In this matter, even some medical men as the Honourable Member for Cheruviruthy hinted, are not very sure of the advantages of vaccination. And perhaps it is not fair to say that they hold this opinion on account of sinister and ulterior motives. That is an unwarranted slur cast on some members of the medical profession. Perhaps, in some other parts of the world and also according to some school of medical thought, vaccination may be found to be a thing which is not very profitable. Therefore, in the interest of the public, it is very necessary to convince them that vaccination is very necessary and that it is the only antidote to small-pox. To carry out social reform without popular conviction is a very difficult task. Indeed, as the member for Cheruviruthy said, to prosecute everyone for breaking the law would be a difficult task for the Government, and if social reforms of this sort are to be carried out without popular conviction, it would be a Herculean task. Therefore, the first step in the right direction is to carry conviction home to the public, and for that purpose a good deal of propaganda work would be necessary. I would ask the Chief Medical and Sanitary Officer whether the Government have done anything so far in this work of propaganda by way of popular lectures, or pamphlets distributed among the people. If such things have not been done, and even if they have been done in some measure, they have to be done on a larger scale so that people may be converted and may be very willing to get themselves vaccinated. Therefore, in this connection, while it is very necessary to appoint vaccinators and to provide lymph and such other materials, it is equally necessary that propoganda work should be carried on on an extended scale. I would, therefore request the Government that they should give their earnest consideration to this point also.

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Mr. P. Krishna Menon.—On a point of information. May I know how you propose to distribute these 8 vaccinators?

Dr. D. Raghavendra Rao.—Three of them are sent to the Northern division.

Mr. P. Krishna Menon.—May I know how many will be available for the Talappalli Taluk?

Dr. D. Raghavendra Rao.—3 to the north of Trichur, 4 to the south of Trichur and 1 to the Cochin-Kanayannur Taluk.

Dr. A. G. Menon.—None to the east, Chittur Taluk?

Dr. D. Raghavendra Rao.—There are 4 already in Chittur. At present the Talappalli and Mukundapuram are the Taluks that are affected most, and a certain portion of the Cochin-Kanayannur Taluk. An extra vaccinator has been deputed to the southern part of Cochin-Kanayannnr Taluk, where there is small-pox. To the two divisions where there is the epidemic, 7 are deputed. That is, to the Sanitary Inspector having Pazhayannur, Wadakkancheri and Kunnamkulam there will be three men and the Sanitary Inspector having Chalakkudi, Irinjalakkuda Karupadanna and those parts under him wil have 4. They have 4 already on their permanent establishment.

മിസ്റ്റർ കെ. അയ്യപ്പൻ.—ഏതെങ്കിലും രാജ്യങ്ങളിൽ വാക്സിനേഷൻ നിബ്ബന്ധമാക്കിട്ടുണ്ടോ എന്നറിഞ്ഞാൽ കൊള്ളാം.

Dr. D. Raghavendra Rao.—In all European countries and also in British India.

മിസ്റ്റർ കെ. അയ്യപ്പൻ.—അങ്ങിനെ നിബ്ബന്ധമാക്കിട്ടുള്ള രാജ്യങ്ങളിൽ അതിന്റെ ഫലം എങ്ങിനെയാണ്?

Dr. D. Raghavendra Rao.—In Europe they practically eradicated this disease.

Dr. A. G. Menon.—Is it compulsory in England? Lord Pentland was against Vaccination.

Dr. D. Raghavendra Rao.—In England they have praticallly eradicated it.

മിസ്റ്റർ കെ. അയ്യപ്പൻ.—എന്നാൽ അതു ഇവിടെയും നിബ്ബന്ധമാക്കുന്നതിനു തടസ്ഥമെന്താണ്?

Dr. D. Raghavendra Rao.—It has been very difficult from my experience during the last 25 years; and the Chief Medical and Sanitary Officer, Dr. Coombes, had to go from village to village in those days to see that children were vaccinated. But for the fact that the educational rule requires that every school going child should be vaccinated, I am afraid the position of the small-pox epidemic would have been quite different from what it is to-day. It would have been practically ablaze in the

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whole State. I think it is high time that in our State vaccination should be made compulsory, and very recently I have addressed the Government that vaccination ought to be made compulsory. Even in our State, there was a great deal of public apathy, criticism against the introducation of vaccination as a compulsory measure. But now I think this is the best time to have this piece of legislation on the anvil because it is only when there is an epidemic that public interest is revived. On this point the Member for Nellayi just now expressed that he took his children to Trichur to get vaccinated. It is only because the epidemic is threatening at his very door. All these years he did not think of it. It is not a personal attack. I just mention this as an example. Nobody ever thinks of vaccinating his children when there is no epidemic. It is only when there is an epidemic that they submit to vaccination. I got telegrams from Desamangalam asking me to send vaccinators. But I have got only 6 men.

മിസ്റ്റർ കെ. അയ്യപ്പൻ.—വാക്സിനെഷൻ നിർബന്ധിതമാക്കാതെ ഗവ മെണ്ടുദ്ദേശിക്കുന്നതു പോലെയുള്ള കാര്യങ്ങൾ ഒരിയ്ക്കലും സാധിയ്ക്കയില്ല. മെഡിക്കൽ മെമ്പർ തന്നെ ഇതു നിബ്ബന്ധിതമാക്കേണ്ട കാലം അതിക്രമിച്ചിരിയ്ക്കുന്നുവെന്നു സമ്മതിയ്ക്കുന്നതു കൊണ്ടു ഉടനെ അതിലേയ്ക്കു വേണ്ടിയുള്ള ഒരു ബിൽ ഗവമെണ്ടു തന്നെ ഈ സഭയിൽ ഹാജരാക്കുമെന്നു വിശ്വസിക്കുന്നു. ഇതിലെ വിദഗ്ധന്മാരുടെ അഭിപ്രായം ഞാൻ തിരക്കി അറിഞ്ഞിടത്തോളം പടിഞ്ഞാറൻ രാജ്യങ്ങളിൽ വാക്സിനേഷൻ കൊണ്ടു വസൂരി തീരെ നിന്നതായിട്ടാണ് അറിയുന്നതു. ജർമ്മനി മുതലായ രാജ്യങ്ങളിലെ ആസ്പത്രികളിൽ വസൂരിയുള്ള മുറികൾ വളരെകുറവാണത്രെ. വാക്സിനേഷൻ കൊണ്ടു വസൂരിരോഗത്തെ തടുക്കുവാൻ കഴിയുമെന്നു വിദഗ്ധന്മാർ അഭിപ്രായപ്പെട്ടിട്ടുള്ള സ്ഥിതിയ്ക്കു ഇവിടെയും നാമും അതിനെ അനുസരിയ്ക്കേണ്ടതാണ്. ഇതിനു എതിരായ പ്രമേയക്കാർ ഇല്ലെന്നു പറയുന്നില്ല. ഏതു കാര്യത്തിനും എതിരു പ്രസ്ഥാനക്കാർ ഉണ്ടാകും. ഇപ്പോൾ നഗരത്തിനു വേണ്ടി യൂറോപ്പിൽ ഒരു പ്രസ്ഥാനമുണ്ടല്ലൊ. അതുപോലെ ഈ വാക്സിനേഷനിലും ഒരു എതിരുണ്ടെന്നു വിചാരിച്ചു് ഭയപ്പെടേണ്ടതില്ല. ഇന്നു ലോകത്തിലുള്ള വൈദ്യ വിദഗ്ധന്മാരുടെ സമ്മതമായ അഭിപ്രായം അനുസരിച്ചു പ്രവർത്തിക്കയെ നമ്മുടെ ഈ കാര്യത്തിൽ നിവൃത്തിയുള്ളൂ.

Dr. D. Raghavendra Rao.—After having said this much I do not think that I need proceed much beyond the points that have been expressed by all the Members about propaganda. I may assure them that a lot of propaganda work has been carried on, lantern lectures have been given in almost all rural areas on small-pox and various other epidemics.

Mr. P. Krishna Menon.—On plague?

Dr. D. Raghavendra Rao.—On small-pox.

Mr. P. Krishna Menon.—When was the lantern lecture given at Kunnamkulam?

Dr. D. Raghavendra Rao.—I can't say.

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Mr. P. Krishna Menon.—I think it was given by the end of Makaram on plague.

The motion was withdrawn leave of the House.

The House rose for the day at 5. p. m.

C. J. MATHEW,

Secretary to the Council.

STANDING FINANCE COMMITTEE OF THE COCHIN LEGISLATIVE COUNCIL.

MINUTES.

The Committee met at 2-40 p. m. on Thursday the 18th of February 1932 in the Diwan's room, Huzur Secretariat.

Present:—

(1) C. G. Herbert Esquire, I. C. S. Chairman.
(2) M. R. Ry. George Chakyamuri Avl., B. A., B. L.
(3) ,, T. A. Ramachandra Ayyar Avl.
(4) ,, P. Kumaran Ezhuthassan Avl.
(5) ,, T. S. Sesha Ayyar Avl., B. A.
(6) ,, C J. Mathew Avl., B. A., B. L. (Convener).

Mr. K. Krishna Pisharody, the Comptroller of Accounts, was not present.

The following items of supplementary grants were considered by the Committee.

1. Rs. 43—under XIV—IV—Legislative Council—Temporary Establishment.
2. Rs. 3,250—under Police.
3. Rs. 1,000—under Education.
4. Rs. 5,000—under Medical.
5. Rs. 2,000—under Vaccination.
6. Rs. 1,796—under I—Land Revenue—Cranganur.
7. Rs. 230—under Police—Cranganur.
8. Rs. 14,952—3—0—under Public Works—Cranganur.
9. Rs. 1,060—0—6—under Registration.

Item No. 1.

Mr. P. Kumaran Ezhuthassan requested that a proclamation may be issued staying eviction suits from properties on Kanom Tenure.

The matter would be referred to the Tenancy Bill Select Committee.

Item No. 2.

Mr. T. A. Ramachandra Ayyar wanted to be furnished with certain informations regarding the arrest of picketers at Trichur.

The Commissioner of Police would be requested to furnish the information.

Item No. 3.

Messrs. P. Kumaran Ezhuthassan and T. A. Ramachandra Ayyar wanted to postpone the appointment of the Superintendent of Vernacular Education, until the Elementary Education Committee submitted their report.

Both of them objected to the passing of the grant. Mr. George Chakyamuri remained neutral.

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